

and not get to choose the health care you are going to get or your family is going to get—defer the decisionmaking about you and your family's health care to a government bureaucracy?

All of us agree, Democrats and Republicans, we want to fix health care. All of us want prevention, wellness, management of chronic disease. All of us want as much freedom as we can give the American people. But the difference lies in how we do it and who pays the bill. That is why I started out with the article from Adrian Rogers. We are going to spend \$2.4 trillion on health care this year, and we are going to get back \$1.7 trillion worth of health care.

We should not be spending a penny more. What we should be saying to the Senate is: Why aren't you fixing what is wrong with this terrible, broken system? And the answer is: We need more money. That is the government's answer every time. Every time: We need more money. We need a new program.

We do not need a new program. What we need is to allow the individual entrepreneurship and ingenuity of the American people and give them the resources with which to buy their health care and make their personal choices, and what you will see is a dynamic that squeezes \$500 billion to \$700 billion out of the cost of health care in this country.

There are a lot of components. Health care is a complex issue. Everybody who worked on it knows it. It is hard in a 20- or 30-minute talk on the floor to explain a bill fully. But if you had absolute access, and you could afford health care, and you got to make the choices, and it did not cost your kids any more in the future to pay for that by borrowing against their future, most Americans would say: I will buy something like that. That is a fix.

And by the way, we are going to incentivize the \$40 billion we spend every year supposedly on prevention to where it is actually making some difference on cost. We are going to quit paying for food that is terrible for you through the Food Stamp Program. We are going to fix the School Lunch Program so we do not feed you high carbohydrates and fat. And we are going to give you protein, fruits, and vegetables. We are going to do that which is necessary to put us on a glidepath to where we have real health care instead of sick care in this country. People will buy that.

I cannot wait for the real debate to start on health care. When you hear the talk, and you read the articles that have been written—just for example, on comparative effectiveness, the director who is involved in that in England said it was the biggest mistake they ever made. It explains why people in England die earlier. It explains why they have a cancer cure rate about a third lower than ours. It explains why people cannot get care because they have a government option. They have a government option that eliminates the

ability for true choice, true access, and true affordability.

One of the things our bill will do is make sure, no matter how sick you are, you get an insurance policy. When it comes time for renewal, they cannot deny you. Our bill gives everybody insurance in this country and incentivizes you to the point where you will have extra money with which you pay for the additional costs associated with that care.

Our plan does not mandate anything, except the base minimum plan is the base minimum plan the Members of Congress get. If you want to buy more than that, you can. But nobody is going to tell you what you have to buy. You buy what is right for you, what is right for your family.

One of the costs of health care in this country—and it is about 8 or 9 percent of the cost of health care—is doctors like me ordering tests you do not need because I fear a malpractice lawsuit. We incentivize the States to make changes—very simple changes—do not eliminate the right of any individual to go to court, but set up health courts or set up judge-doctor-lawyer panels or a combination thereof, and we give them extra money if, in fact, they will do that. It is an easy, cheap buy. Because if we reform the tort system State by State, we get back about a hundredfold for every dollar we put out that comes out of health care that will then go to prevention, wellness, and management of chronic disease.

We have cost-shifting in this country. If you opt out and you go to an ER, your State can buy you a high-deductible policy, whereas you are still covered. You are not going to ever lose your home because you had an accident or you had a major health complication because you will be auto enrolled as soon as you hit the ER. So we eliminate about \$200 billion in cost-shifting.

I have just outlined \$500 billion that can go away under our bill out of \$2.4 trillion—money that does not help anybody get well, money that does not prevent anybody from getting sick.

I had an orthopedist in my office today and he had a patient who he thought had a torn anterior cruciate ligament. That is a ligament connecting the femur to the tibia. And she could not relax. He is a good orthopedist. By clinical exam, you can tell if somebody has torn an ACL, anterior cruciate ligament. So he said: Well, you can't relax. We'll do an MRI. So she comes back a week later and says: Doctor, I didn't do the MRI. I didn't want to pay for that. And she brought a glass of wine with her, a glass of chardonnay. She said: I think if I drink this, about 15 minutes after I drink this, I think I will be relaxed enough for you to do it. Well, sure enough, she did, and she relaxed. She had a torn ACL, and she never had to have an MRI. It just saved us about \$1,800. It saved her and us \$1,800. He could have given her xanax and done the same thing.

But the point is, she made a logical decision not to spend \$1,800 because there was another way of doing it. Part of that was because she had a \$5,000 deductible health care policy, so she made a good economic choice. Multiply that 100,000 times in this country every month and see how much money we can take out of the health care system by people acting in their own best health interest and financial interest.

We have a lot in front of us, and we have a lot that is riding on us. I hope we get to see the bills, which we have not seen yet, and what people want to do. The first bill out is: The government does everything; the government is in control. There is not one government program that either offers the services or is not bankrupt that we have on health care today. Medicare is bankrupt. Medicaid—we are bankrupt, so they are bankrupt. They have \$80 billion worth of fraud in Medicare; \$40 billion worth in Medicaid. The Indian Health Service is a sham, especially on the reservation, because we do not have the quality and we have not put the money there. Why shouldn't a Native American have an insurance policy to be able to buy health care wherever they want? Why shouldn't a veteran be able to get care wherever they want rather than have to travel 200 miles to a VA health care center? Why can't we keep the commitment that we would say: If we are going to offer you access, then we are going to offer you access to the best, the highest quality health care, with you making the decisions about your care, when you get that care, and who gives you that care.

The patient has to come first. Senators' egos have to come second. And we have to fix this program in a way that not only solves the health care crisis but does not create another crisis for our children down the road.

With that, I yield the floor.

I thank my colleague from Rhode Island for his patience, and I wish him a good night.

The PRESIDING OFFICER (Mr. UDALL of Colorado). The Senator from Rhode Island.

Mr. WHITEHOUSE. Mr. President, it is always a pleasure to hear the Senator from Oklahoma discussing health care, which I know is very dear to him. So I did not feel my time was wasted listening to him speak on that subject, and I wish him a good evening as well.

Mr. President, I ask unanimous consent, if I may, to speak in morning business, but to exceed the 10-minute rule.

The PRESIDING OFFICER. Without objection, it is so ordered.

#### GASPEE DAY

Mr. WHITEHOUSE. Mr. President, the Boston Tea Party is one of the celebrated events in American history. From a young age, Americans learn the story of the men who crept onto British ships moored in Boston harbor on December 16, 1773, to toss overboard